DEMOLITION PERMIT APPLICATION

Gallatin, Tennessee

Date Applied _ /20_

Project Address	Subdivision		Phase	Section	Lot#
Owner	Mailing Address	Phone		Em	nail
Demo Contractor	Mailing Address	Phone		Em	nail
Structure Type		Dangerous Building?			
\Box Industrial \Box	Commercial Residential	□Yes	□No		
\square Asbestos Letter (n		☐Asbestos Rep	•	•	· · · · · · · · · · · · · · · · · · ·
Call the Environmen Pollution Control Div All utilities must be o	tal Specialist with the Tennessee I vision at (615) 532-6828 for an ask disconnected and capped prior to at provide service to the address.	Department of pestos inspection	Environm on.	ent & Conser	vation Air
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In the event the licensed contractor disclosed hereon is replaced on this project, the Gallatin Building Department shall be immediately notified. Failure to notify may result in revocation of this permit and is a violation of state law.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.